

PART B - FEE(S) TRANSMITTAL



Complete and send this form, together with applicable fee(s), to: **Mail** Mail Stop ISSUE FEE
Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450
or Fax (571)-273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)

7590 03/29/2006

William G. Auton
 ESC/JAZ
 40 Wright Street
 Hanscom, MA 01731-2903

04/10/2006 NNGUYEN2 00000005 010465 10041588

01 FC:1501 1400.00 DA

Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

Certificate of Mailing or Transmission

I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.

William G. Auton	(Depositor's name)
	(Signature)
4 April 2006	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/041,588	01/10/2002	Daniel T. Moriarty	AFB00556	5207

TITLE OF INVENTION: TWENTY GIGABIT PER SECOND TWO TO ONE MULTIPLEXOR

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$0	\$1400	06/29/2006
EXAMINER		ART UNIT	CLASS-SUBCLASS		
NGUYEN, BRIAN D		2616	370-537000		

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
 "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
 (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 William G. Auton

2

3

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

United States of America as represented
 by the Secretary of the Air Force.

Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government

4a. The following fee(s) are enclosed:

Issue Fee
 Publication Fee (No small entity discount permitted)
 Advance Order - # of Copies _____

4b. Payment of Fee(s):

A check in the amount of the fee(s) is enclosed.
 Payment by credit card. Form PTO-2038 is attached.
 The Director is hereby authorized to charge the required fee(s), or credit any overpayment, to Deposit Account Number AF01-0465 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above. NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

Authorized Signature

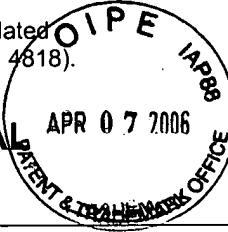
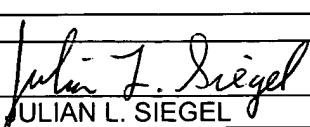
Typed or printed name JULIAN L. SIEGEL

Date 4 April 2006

Registration No. 22,407

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

Effective 10/08/2004 Fees pursuant to the Consolidated Appropriations Act 2005 (H.R. 4818).		Complete if Known																																																							
Fee Transmittal APR 07 2006 For FY 2006 		Application Number	10/041,588																																																						
		Filing Date	10 January 2002																																																						
		First Named Inventor	Daniel T. Moriarty																																																						
		Examiner Name	Brian D. Nguyen																																																						
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27	Art Unit	2616																																																							
TOTAL AMOUNT OF PAYMENT	\$1,400.00	Attorney Docket Number	AFB00556																																																						
METHOD OF PAYMENT (check all that apply)																																																									
<input type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> None <input type="checkbox"/> Other (please identify): _____																																																									
<input checked="" type="checkbox"/> Deposit Account Deposit Account Number: AF 01-0465 Deposit Account Name: Dept of the Air Force																																																									
For the above-identified deposit account, the Director is hereby authorized to: (Check all that apply)																																																									
<input checked="" type="checkbox"/> Charge fee(s) indicated below		<input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee																																																							
<input checked="" type="checkbox"/> Charge any additional fee(s) or Underpayments of fee(s) under 37 CFR 1.16 and 1.17		<input checked="" type="checkbox"/> Credit any overpayments																																																							
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.																																																									
Fee Calculation																																																									
1. BASIC FILING, SEARCH, AND EXAMINATION FEES <table border="1"> <thead> <tr> <th rowspan="2">Application Type</th> <th colspan="2">FILING FEES</th> <th colspan="2">SEARCH FEES</th> <th colspan="2">EXAMINATION FEES</th> <th rowspan="2">Fees Paid (\$)</th> </tr> <tr> <th>Fee (\$)</th> <th>Small Entity</th> <th>Fee (\$)</th> <th>Small Entity</th> <th>Fee (\$)</th> <th>Small Entity</th> </tr> </thead> <tbody> <tr> <td>Utility</td> <td>300</td> <td>150</td> <td>500</td> <td>250</td> <td>200</td> <td>100</td> <td>_____</td> </tr> <tr> <td>Design</td> <td>200</td> <td>100</td> <td>100</td> <td>50</td> <td>130</td> <td>65</td> <td>_____</td> </tr> <tr> <td>Plant</td> <td>200</td> <td>100</td> <td>300</td> <td>150</td> <td>160</td> <td>80</td> <td>_____</td> </tr> <tr> <td>Reissue</td> <td>300</td> <td>150</td> <td>500</td> <td>250</td> <td>600</td> <td>300</td> <td>_____</td> </tr> <tr> <td>Provisional</td> <td>200</td> <td>100</td> <td>0</td> <td>0</td> <td>0</td> <td>0</td> <td>_____</td> </tr> </tbody> </table>				Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)	Fee (\$)	Small Entity	Fee (\$)	Small Entity	Fee (\$)	Small Entity	Utility	300	150	500	250	200	100	_____	Design	200	100	100	50	130	65	_____	Plant	200	100	300	150	160	80	_____	Reissue	300	150	500	250	600	300	_____	Provisional	200	100	0	0	0	0	_____
Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)																																																		
	Fee (\$)	Small Entity	Fee (\$)	Small Entity	Fee (\$)	Small Entity																																																			
Utility	300	150	500	250	200	100	_____																																																		
Design	200	100	100	50	130	65	_____																																																		
Plant	200	100	300	150	160	80	_____																																																		
Reissue	300	150	500	250	600	300	_____																																																		
Provisional	200	100	0	0	0	0	_____																																																		
2. EXCESS CLAIM FEES <table border="1"> <thead> <tr> <th>Fee Description</th> <th>Small Entity</th> </tr> </thead> <tbody> <tr> <td>Each claim over 20 (including Reissues)</td> <td>Fee (\$)</td> </tr> <tr> <td>Each independent claim over 3 (including Reissues)</td> <td>Fee (\$)</td> </tr> <tr> <td>Multiple dependent claims</td> <td>Fee (\$)</td> </tr> </tbody> </table>				Fee Description	Small Entity	Each claim over 20 (including Reissues)	Fee (\$)	Each independent claim over 3 (including Reissues)	Fee (\$)	Multiple dependent claims	Fee (\$)																																														
Fee Description	Small Entity																																																								
Each claim over 20 (including Reissues)	Fee (\$)																																																								
Each independent claim over 3 (including Reissues)	Fee (\$)																																																								
Multiple dependent claims	Fee (\$)																																																								
<table border="1"> <thead> <tr> <th>Total Claims</th> <th>Extra Claims</th> <th>Fee (\$)</th> <th>Fee Paid (\$)</th> <th>Multiple Dependent Claims</th> <th>Fee (\$)</th> <th>Fee Paid (\$)</th> </tr> </thead> <tbody> <tr> <td>-20 or HP =</td> <td>x</td> <td>=</td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>				Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	Multiple Dependent Claims	Fee (\$)	Fee Paid (\$)	-20 or HP =	x	=																																												
Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	Multiple Dependent Claims	Fee (\$)	Fee Paid (\$)																																																			
-20 or HP =	x	=																																																							
HP = highest number of total claims paid for, if greater than 20.																																																									
<table border="1"> <thead> <tr> <th>Indep. Claims</th> <th>Extra Claims</th> <th>Fee (\$)</th> <th>Fee Paid (\$)</th> <th>- 3 or HP =</th> <th>x</th> <th>=</th> </tr> </thead> </table>				Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	- 3 or HP =	x	=																																															
Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	- 3 or HP =	x	=																																																			
HP = highest number of independent claims paid for, if greater than 3.																																																									
3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(3)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 USC 41(a)(1)(G) and 37 CFR 1.16(s).																																																									
<table border="1"> <thead> <tr> <th>Total Sheets</th> <th>Extra Sheets</th> <th>Number of each additional 50 or fraction thereof</th> <th>Fee (\$)</th> <th>Fee Paid (\$)</th> </tr> </thead> <tbody> <tr> <td>- 100 =</td> <td>/50</td> <td>(round up to a whole number) x</td> <td>=</td> <td></td> </tr> </tbody> </table>				Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)	- 100 =	/50	(round up to a whole number) x	=																																													
Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)																																																					
- 100 =	/50	(round up to a whole number) x	=																																																						
4. OTHER FEE(S) Non-English Specification, \$130 fee (no small entity discount) Other (e.g. late filing surcharge): Issue Fee _____																																																									
SUBMITTED BY Signature:  Julian L. Siegel Registration No. (Attorney/Agent) 22,407 Telephone (781) 377-4074 Name (Print/Type): JULIAN L. SIEGEL Date 4 April 2006																																																									



TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

		Application Number	10/041,588
		Filing Date	10 January 2002
		First Named Inventor	Daniel T. Moriarty
		Art Unit	2616
		Examiner Name	Brian D. Nguyen
Total Number of Pages in this Submission	3	Attorney Docket Number	AFB00556

ENCLOSURES (check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts / Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to Technology Center <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Issue Fee
Remarks		

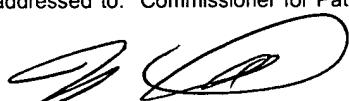
SIGNATURE OF APPLICANT, ATTORNEY OR AGENT

Firm Name			
Signature			
Printed Name	WILLIAM G. AUTON		
Date	4 April 2006	Reg. No.	31,320

CERTIFICATE OF TRANSMISSION/ MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.

Signature



Typed or printed name

WILLIAM G. AUTON

Date

4 April 2006